



THE NIH LABOR-MANAGEMENT COOPERATION COUNCIL

COOPERATION PRINCIPLES AGREEMENT

In order to foster a more productive working relationship with the various Unions at the NIH, the Labor-Management Cooperation Council is established and is dedicated to supporting and facilitating the NIH's mission of the pursuit and promotion of beneficial medical research through the practice of constructive interest based Labor-Management relation.

PURPOSE

We jointly resolve to pursue and promote an improved relationship between Labor and management to ensure that:

- NIH carries out its medical research mission in the most effective and efficient manner possible;
- 2. NIH enhances its commitment to a positive work environment for all employees; and
- 3. NIH provides the highest quality service to both its internal and external customers.

The Council recognizes that "cooperation" involves:

- Mutual respect and understanding.
- "Free flow" sharing of all information relevant to issues under consideration by the Council.
- Decisions based on consensus.
- Joint training as necessary.
- An evolutionary process.

OBJECTIVES

To involve Management and union representatives as equals and to openly share information at the earliest pre-decisional stage regarding significant personnel policies, practices and conditions of employment.

The Labor-Management Cooperation Council will identify issues/problems with Agency-wide impact and develop solutions that ensure the delivery of the highest quality service to the public, as follows:

1. Improve relationships between Management and Employees;
2. Reduce litigation, increase positive relationships;
3. Increase utilization of employee ideas and talents;
4. Include employee input into the decision making process;
5. Change the perception that Labor-Management relations is a “one-sided” system;
6. Ensure that NIH managers recognize the human impact, as well as the cost effectiveness of a decision;
7. Ensure that Union leaders and NIH managers accept accountability for their actions;
8. Increase communications between NIH employees, labor organizations and management;
9. Foster better human resource utilization through upward mobility, development of “cross training” and “second career” programs.

GUIDELINES

We as the Cooperation Council recognize that proposed resolutions by this committee will be forwarded to:

1. Functional Management Level.
2. Deputy Director for Management.
3. NIH Director.
4. Health and Human Services (HHS) Labor-Management Cooperation Council.

For each issue brought forth by the Cooperation Council, a reasonable time frame for all concerned will be designated for response/resolution.

Individual grievances only if related to a larger issue may be discussed and confidentiality will be maintained.

Agendas will be prepared for each meeting and disseminated prior to the meetings, if at all possible.

Each agenda item will be discussed thoroughly and an action reached before proceeding to another topic. Topics requiring further study may be rescheduled. Where mutually satisfactory decisions are not reached, the topic may be tabled, reverting to traditional management resolutions, for example, grievance procedures, impact negotiations, etc. Subject matter Experts may be invited to address the Cooperation Council and/or respond to questions when needed.

REPRESENTATION

The Cooperation Council will consist of an equal number of union and management representatives.

Union:

One member from each of the unions as appointed by their respective Locals.

Management:

Members to be determined by the Collective Bargaining Official.

Federal Managers Association:

One member as determined by the Federal Managers Association.

Any party to this agreement may designate an alternate and/or temporary substitute to attend a particular meeting of the Council when the regular representative will be unable to attend, Alternates who attend with regular members may not vote. Meetings are opened to visitors. The Collective Bargaining Official may replace any Council member appointed as a management representative. A union may replace its designated Council member. The NIH Collective Bargaining Official and the International Representatives of the Unions are ex-officio members of the Council. The Collective Bargaining Official shall designate a Coordinator for the Council.

CHAIRING

Responsibility for chairing the meeting will alternate between Management and the Unions. Both Management and the Unions shall determine whether their chair assignments will be permanent or rotate among their members.

Each person wishing to speak will be recognized by the Chair/Facilitator before proceeding to speak.

The Chair/Facilitator shall recognize a motion from either party to table a topic for further study.

REPORTING

Topics will be recorded as discussed at the meeting. Drafts of the minutes of the meetings will be read and approved at the beginning of the next scheduled meeting.

DAY/TIME OF MEETINGS

Meetings will be held the third Thursday of each month, beginning at 1:30 p.m., and they shall be limited to two hours. The meetings will be conducted with a minimum of two managers, two union officials, and a chair person (or appointed designees). The agenda will be distributed at each meeting. Topics that cannot be completed within the time allotted will be addressed at a designated sub-committee meeting. Procedural aspects of this sub-committee shall be discussed by the Council membership. Participants will be advised of the designated time and location of the meeting.

Topics not on the agenda will not be discussed but rather shall be placed on the following month's agenda. The agenda will include a brief description of each item to be discussed. Emergency items may be added to the agenda by mutual consent.

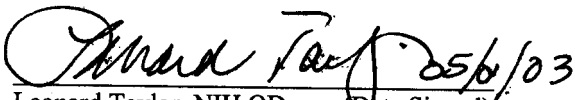
DURATION AND CHANGES

This agreement shall remain in effect for three years from the signing of this document. Any party to the agreement may propose changes to this agreement. Adoption of any proposed change shall be by a consensus of the members of the Council. This agreement supercedes the National Institutes of Health Labor-Management Partnership Council Principles Agreement signed on or about February 20, 1998.

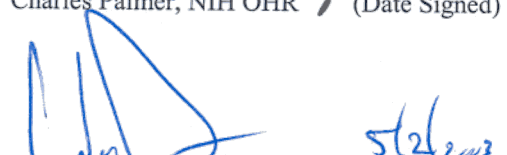
The Cooperation Council shall terminate three years after the effective date of the signing of this document. At the end of the three-year period, NIH and the Unions may agree to continue the present Council, or establish a new Cooperation Council.

We the undersigned members of the NIH Labor-Management Cooperation Council, by affixing our signatures below, agree to the purpose, structure and objectives as stated within this Labor-Management Cooperation Council Principles Agreement, as jointly developed by the members of the Council.

FOR THE AGENCY:

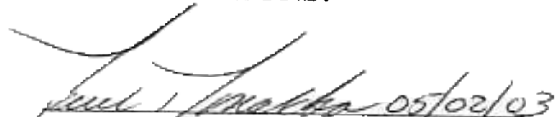

Leonard Taylor, NIH OD (Date Signed) 05/01/03

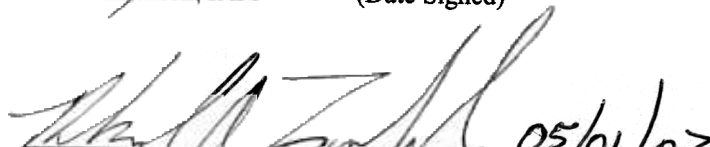

Charles Palmer, NIH OHR (Date Signed) 4/23/03


Walter Jones, NIH CC (Date Signed) 5/2/03


Arturo Giron, NIH ORS (Date Signed) 5/1/03

FOR THE UNIONS:


Paul Donaldson, IAFF (Date Signed) 05/02/03


Richard Laubach, APGE (Date Signed) 05/01/03


Herman Bartz, FOP (Date Signed) 5/01/03


Mildred Clark, WAMTC (Date Signed)

FOR THE FEDERAL MANAGERS ASSOCIATION:


Howard Hochman (Date Signed) 5/8/2003